

STATE OF COLORADO
Department of State

1700 Broadway, Suite 270
Denver, CO 80290



Gigi Dennis
Secretary of State

Holly Lowder
Director, Elections

Attn: *Scott Doyle*
County Clerk and Recorder

COUNTY: **LARIMER**

Pursuant to Section 1-7-514 C.R.S. and Election Rule 11, the following election devices have been selected for Random Audit for the 2006 Primary Election.. Please follow the instructions in Rule 11 to determine the method for conducting the post-election audit. Additional help is available on our web site, or you can contact John Gardner at (303) 860-6971 for additional information.

The following table lists the EQUIPMENT that has been randomly selected for auditing:

| <u>Make/Model</u> | <u>Type</u> | <u>Use:</u> | <u>Serial #</u> | <u>Race Name to Audit:</u> | <u>Machine Count:</u> | <u>Manual/Hand Count:</u> | <u>Canvass Board</u> <u>Initials</u> |
|-------------------|-------------|-------------|-----------------|---------------------------------|-----------------------|---------------------------|---|
| Accuvote TSx | DRE | Early | 273240 | Rep. County Assessor - Miller | 18 | 18 | CJM, EAB, MW |
| Accuvote TSx | DRE | Early | 273240 | Rep. State Treasurer - Hillman | 23 | 23 | CJM, EAB, MW |
| Accuvote TSx | DRE | Early | 273240 | Rep. County Assessor - Johnson | 11 | 11 | CJM, EAB, MW |
| Accuvote TSx | DRE | Vote Center | 273757 | Rep. County Coroner - Allen | 96 | 96 | DG, SJS, RO |
| Accuvote TSx | DRE | Vote Center | 273757 | Dem. Attorney General - O'Brien | 43 | 43 | DG, SJS, RO |
| Accuvote TSx | DRE | Early | 273769 | Rep. County Assessor - Johnson | 23 | 47 | DG, SJS, RO |
| Accuvote TSx | DRE | Early | 273769 | Rep. County Assessor - Miller | 31 | 31 | DG, SJS, RO |
| Accuvote TSx | DRE | Early | 273769 | Rep. State Treasurer - Hillman | 47 | 47 | DG, SJS, RO |
| Accuvote TSx | DRE | Early | 274349 | Rep. State Treasurer - Hillman | 51 | 51 | DG, SJS, RO |

For Internal Use Only

Phone Number: _____

E-mailed by (name): _____

Email Date and Time: _____

Email Address: _____

(Attach copy of E-mail)

Faxed by (name): _____

Faxed Date and Time: _____

Fax Number: _____

(Attach copy of fax confirmation)

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| | | | | | | | |
|--------------|-----|-------------|--------|---|-----|-----|--------------|
| Accuvote TSx | DRE | Early | 274349 | Rep. County Assessor - Johnson | 33 | 33 | DG, SJS, RO |
| Accuvote TSx | DRE | Early | 274349 | Rep. County Assessor - Miller | 26 | 26 | DG, SJS, RO |
| Accuvote TSx | DRE | Vote Center | 274464 | Rep. County Coroner - Allen | 33 | 33 | CSM, EAB, MW |
| Accuvote TSx | DRE | Vote Center | 274464 | Dem. Attorney General - O'Brien | 11 | 11 | CSM, EAB, MW |
| Accuvote | OS | Vote Center | 73971 | Dem. Attorney General - O'Brien | 9 | 9 | SJS, RO, DG |
| Accuvote | OS | Vote Center | 73971 | Rep. County Coroner - Allen | 13 | 13 | SJS, RO, DG |
| Accuvote | OS | Vote Center | 74134 | Dem. Attorney General - O'Brien | 9 | 9 | SJS, RO, DG |
| Accuvote | OS | Vote Center | 74134 | Rep. County Coroner - Allen | 8 | 8 | SJS, RO, DG |
| Accuvote | OS | Vote Center | 74175 | Rep. State Board of Education - Dist 4 - Schaffer | 227 | 227 | MW, EAB, CSM |
| Accuvote | OS | Vote Center | 74175 | Dem. State Senate Dist 15 - Miller | 67 | 67 | MW, EAB, CSM |

NOTE: If the RACES selected were not counted on that device or do not appear in the central count ballot selection, the Canvass board shall audit "Republican for State Treasurer" or "Democrat for Attorney General" in place of the missing races. Please mark the form appropriately. If the MACHINES selected were not used in the election, please contact JOHN GARDNER (303) 860-6971 as soon as possible.

Please complete the highlighted fields in the attached table and fax, or e-mail the form back to the Secretary of State at: voting.systems@sos.state.co.us. This form must be returned no later than: 5:00pm August 21, 2006.

| | | |
|------------------------------|----------------------------|----------------------------|
| For Internal Use Only | E-mailed by (name): _____ | Faxed by (name): _____ |
| | Email Date and Time: _____ | Faxed Date and Time: _____ |
| | Email Address: _____ | Fax Number: _____ |
| | Phone Number: _____ | (Attach copy of E-mail) |